

JPRS 77568

12 March 1981

Worldwide Report

EPIDEMIOLOGY

No. 221

FBIS

FOREIGN BROADCAST INFORMATION SERVICE

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RESEARCH CENTER TO STUDY TROPICAL DISEASES

Yaounde CAMEROON TRIBUNE in English 21 Jan 81 p 10

[Article by Tazoacha Asonganyi and N. Forbinake: "Research and Training in Tropical Diseases: A New Dimension of CUSS"]

[Text] Millions of people in the world suffer from a group of diseases endemic in the tropics, which have come to be known as Tropical Diseases. Because these diseases undermine the health and development of a large part of the world population, the United Nation Development Programme/World Bank/World Health Organisation (U. N. D. P./World Bank/W. H. O.) have launched a special programme for research and training in Tropical Diseases to combat the diseases. The programme was launched in 1975 under the directorship of Professor A. Lucas of Nigeria. Although there are very many diseases that fall under the categorization of Tropical Diseases, the UNDP/World Bank/WHO programme initially limited its activities to only six of the diseases; Malaria, Schistosomiasis, Filariasis (including Onchocerciasis, which is the filariasis predominant here in Cameroon), Trypanosomiasis (including African sleeping sickness and South American Chagas' Disease), Leishmaniasis and Leprosy.

In setting up this programme the promoters had two main objectives:

- 1) To develop improved and new tools needed for the control of tropical diseases.
- 2) To strengthen the Biomedical research capability of tropical countries through the supply of funds and equipment.

To achieve these two goals, the Special Programme incorporates training in the research activities and strengthens selected centres in tropical underdeveloped countries to carry out both research and training. This, it is hoped, will eventually enable the underdeveloped countries to become self sufficient in implementing their own programmes for the control and eventual eradication of the diseases.

Prior to 1979, there were only two Tropical Research (TDR) centres in sub-saharan African countries; both in anglophone countries: one in Ibadan (Nigeria) and the other in Nairobi (Kenya). In August 1979, CUSS (the University Centre for Health Sciences), Yaounde and the WHO signed a contract setting up the first of such centres in francophone Africa south of the Sahara here in Cameroon. The main purposes of the project as defined by the contract are to carry out both research and training to enhance the research capability of CUSS, to undertake both research and development in Tropical Diseases and other fields. At present the project focuses

its research efforts on the immunology (i. e., the defensive reaction of the host, man, to the infection), Chemotherapy (i. e., development of new medicines to combat the parasite) and genetic markers (i. e., the differences in individuals that causes differences in infection) of Onchocerciasis (the form of filariasis here in Cameroon). The team looking at the immunological aspect is led by Professor Jacob L. Ngu and comprises two expert Biochemists (Drs. Vincent Titanji and Tazoacha Asonganyi), one expert Parasitologist/Immunologist (Dr. Rose Leke) and one maintenance technician (Mr. Gerald Fohung). Professor Eben Moussi is working on the Chemotherapy while Professor Lazare Kaptue is studying genetic markers. In particular, the immunology group is attempting to set up a simple immunodiagnostic method for Onchocerciasis and searching for a suitable vaccine for the parasitic disease.

As said above, one of the objectives of the TDR-CUSS project is to train local and foreign personnel in basic research methods; which is why from 1st. October to 22nd. December 1980, an International course in immunology was held in CUSS at which twelve participants from the Republics of Benin (2), Congo (1) and the United Republic of Cameroon (9) were taught basic research methods and concepts in immunology. The teachers for the course were drawn from CUSS, the University of Geneva and Institute Pasteur, Lille. At the ceremony marking the end of the course, what Professor Dan N. Lantum (the Vice Dean of CUSS) said about the course was descriptive of both the course and the TDR-CUSS project that organised the course:

"I wish to thank the organisers of this international training programme for their hard work and their untiring effort to get the idea off the ground. There were too many constraints, ab initio, but with their determination, the course was successfully organised. I wish to thank particularly Prof. J. L. Ngu, the TDR/WHO programme Director for successfully initiating this course with his powerful research team, which is powerful in their qualifications and powerful indeed in their research and teaching capacity. They have shown that the WHO/TDR project is not only here to strengthen the UCHS/CUSS but also to help strengthen the African region in their fight against parasitic diseases. Although this course is only a minute sub-system in the complex chain in the long fight, I would consider that the TDR/WHO/CUSS Project is indeed facing up to its objectives of institution strengthening and of contribution to learning....."

It should also be added here that Professor Lantum is the WHO/internal evaluator of the WHO/TDR/CUSS Project. As for the Chief of the TDR-CUSS Project Pro. Jacob L. Ngu, he thought the end of course examination results were "very good" not only because the attendance of the course was "first class" but also because the motivation of the course attendants was "exemplary".

The TDR/CUSS project, true to the spirit of the WHO Special Programme, has a very multidisciplinary team which hopes that its contributions with those of other similar teams around the world will one day help in the eradication of at least some of the Tropical Diseases.

Already within the grasp of the WHO Special Programme are two vaccines that will bring a revolution in health: a vaccine against malaria, whose application shall be the first successful, massive and direct benefit of immunology to parasitic diseases and a vaccine against leprosy, which will lead to the conquest of this

frightening and crippling disease. With the enthusiasm with which the WHO is pushing the Special Programme, it is sure that one day, all the six tropical diseases cited above, and more, will come under control. When in 1966 the WHO declared war on smallpox, it was not very sure it would succeed due to several constraints. But in December 1979 WHO announced the total world wide eradication of smallpox. SMALLPOX IS DEAD! was the declaration on the front cover of the May 1980 WHO magazine, World Health. This was thirteen years after the war was declared. How many years it will take the same magazine to declare dead some of the Tropical Diseases that the WHO has committed itself to erradicating is not known, but that the same declaration will be made for each of them, there is no doubt.

CSO: 5400

HEALTH MINISTRY LAUNCHES TB CAMPAIGN

Many Reasons Stated

Gaborone DAILY NEWS in English 27 Jan 81 p 2

[Text] The Ministry of Health is this week spearheading an anti-tuberculosis campaign. People may wonder why. After all, there have already been anti-teaching sessions in the radio, articles in the national papers and health workers are always talking to the public about tuberculosis.

The reasons for this campaign are many, but based on the slowness of people to understand how much damage is caused by this disease and that it can be controlled. This is the first of a series of articles to appear in the DAILY NEWS. The next one will be Thursday.

Tuberculosis is a great killer in this country. One out of every five people dying in this country dies from tuberculosis.

Tuberculosis affects our economy by killing people still in the productive years of life and making people invalid while they should still be productive to the economy.

The disease affects the economy by causing absenteeism from work and by necessitating the state to spend large amounts of money trying to control the disease, hiring people, financing hospital beds, providing drugs. Twenty per cent of hospital beds in this country are used for tuberculosis.

Further to illustrate how serious this disease is in this country, between 2000 and 3000 new cases are discovered every year.

In 1979 it was 2 800. Probably about four times this number is suffering from the disease in this country, many are on treatment, many are not.

What our campaign week seeks to solicit from the people of this country is co-operation from patients have been most discouraging and we cannot control tuberculosis that way. We will only be able to control the disease and live in relative safety from it if every patient who is put on treatment follows that treatment diligently until he is told by the health workers that he is cured.

Campaign Started

Gaborone DAILY NEWS in English 29 Jan 81 p 2

[Text]

THE FOLLOWING is the second statement by the Ministry of Health on the anti-tuberculosis campaign that has just been launched country-wide.

The Ministry of Health is aware that at times the taking of treatment may be inconvenient to a patient for various reasons, e.g. distance from health facility. This is because treatment takes a long time - 18 months. However, it is in the interest of both the patient and the nation that treatment is taken properly.

We are also aware that some people, because of traditional beliefs, may not believe that this disease is curable by modern medicine. We can assure such people that this disease is completely curable and that modern medicine is the only way of curing it.

As said earlier, cooperation from patients has been poor so far. According to our records this year in only one place are 70% or more patients taking treatment regularly.

Furthermore our tests show that even amongst those who come to health facilities regularly to collect their treatment, a large number do not bother to swallow the tablets at home. This situation has to improve if we are to conquer this disease. We can only achieve that by patients (and the public) cooperating with us.

Lastly, we would like to say that from next week we shall be doing a survey to measure the amount of tuberculosis we have in our community. Such a survey was last done in 1956 in this country and the present survey gives us an opportunity to determine how much the disease has declined in these 20 odd years since the last survey.

The results will also help us in our executing of the National Tuberculosis Programme.

Those registered for the survey are earnestly requested to attend on the days when the survey team will be visiting their village or town for examination.

CSO: 5400

MALARIA INCIDENCE AMONG GOLD PROSPECTORS ON RISE

Malaria Up 10 Percent

Rio de Janeiro JORNAL DO BRASIL in Portuguese 16 Jan 81 p 20

[Text] Brasilia--The incidence of malaria increased about 10 percent between 1979 and 1980, according to Jose Fiuza Lima, superintendent of public health campaigns. The increase from 145,000 cases to the 160,000 cases estimated by SUCAM [Superintendency of Public Health Campaigns] occurred mainly in the jurisdictional area of Amazonia, near the gold fields.

According to Mr Jose Fiuza, one-third of the malaria cases in the country are in Rondonia, where the strategy [for prevention] will be extended to other foci, mainly those located in the prospecting areas.

Strategy

Last year in Rondonia, instead of spraying twice a year, SUCAM treated the houses with DDT every 2 months. The number of health officers was increased, supervision was redoubled and the direction of the operation was transferred. Previously it was the responsibility of an agronomist; now a sanitary physician is in charge, and another sanitation hygienist specialist has been hired.

Stressing that the gold fields are dangerous because the prospectors move around quite a bit and spread the disease, Mr Jose Fiuza said the strategy to be adopted in that area will be ready by the end of the month.

"In the prospecting areas, the malaria campaign will be conducted by systematic action against the vector and treatment of the disease, particularly in Amazonia and the central-western region, so that what occurred in the Terra Nova settlement will not be repeated."

He stressed that the Terra Nova settlement in Mato Grosso is one of the locations where the number of malaria cases increased because of the movement of prospectors.

Santa Catarina

The SUCAM superintendent reported that scientist Leonidas de Mello Deane will go to the coast of Santa Catarina and Parana next week to study malaria foci that appear in the region between September and May, subsiding in the winter.

The researcher hypothesized that the malaria host is a particular species of monkey.

Campaign in Gold Fields

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 28 Jan 81 p 13

[Text] From now until next Friday, in Brasilia, SUCAM [Superintendency of Public Health Campaigns] will discuss the systematizing and standardization of actions against malaria in the gold prospecting areas, especially in the clandestine mines (there are over 200 in the state of Para alone). SUCAM technicians will discuss the difficulties in reaching the clandestine mines and the large number of malaria cases occurring in these areas.

Jose Fiuza Lima, SUCAM superintendent, will coordinate the discussions on combatting malaria. The SUCAM regional directors in Mato Grosso, Rondonia, Amazonia, Roraima and Para will take part. Alvaro Uribe and Victor Valenzuela, two specialists from PAHO (Pan American Health Organization), have also been invited. On Friday, after the conference in Brasilia, SUCAM hopes to present to Minister Waldyr Arcoverde a plan of action to be developed in the clandestine gold fields. This will entail extra expense, since these areas are accessible only by plane.

According to Jose Fiuza Lima, it has already been possible to establish operations to combat and control malaria in the Serra Pelada mine. Of the almost 25,000 men working there now, 419 were found to have malaria, a number SUCAM considers quite low. The agency has already sprayed 4,051 houses, protecting over 20,000 people. It has examined 3,368 slides and has administered 31,000 yellow fever vaccinations and 26,000 meningitis vaccinations.

6362

CSO: 5400

TYPHOID FEVER IMMUNIZATION BEGUN IN TWO PARANA CITIES

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 23 Jan 81 p 12

[Text] (Ourinhos)--Through the 18th Sanitary District of Jacarezinho, the Parana Secretariat of Health and Social Welfare is preparing to administer typhoid fever vaccinations to the residents of this city, which has suffered the effects of two rain storms that devastated the region, with damages estimated by the mayor's office at 58 million cruzieros. Health inspectors and social workers have been in Ourinhos since last Friday, administering vaccines and distributing sodium hypochloride to be added to the drinking water.

The Curitiba LRA (Brazilian Assistance Legion) has already activated an aid section to send clothing, medicine and food to the 250 homeless in Jacarezinho. It is still raining in the area, and the water level of the Paranapanema tributaries--Partura, Turvo, Pardo, Novo and Cinza--is rising rapidly. Traffic between Ourinhos and Jacarezinho via BR-103 is prohibited because the Parana DER (Department of Streets and Highways) has been unable to repair the pillars supporting the Rio Partura bridge at km 2 on that highway, which collapsed 15 days ago. Traffic between southern Sao Paulo and northern Parana is now being routed via Ourinhos-Cambara-Jacarezinho-Santo Antonio da Platina.

The Paranapanema River is above its normal level, which is causing concern among the people of Piraju, Xavantes, Ourinhos and Salto Grande, since the hydroelectric plants at Jurumim, Xavantes and Salto Grande are daily discharging excess water to prevent overload on their dams. In Marques dos Reis, on the border between Parana and Sao Paulo, many owners of country large and small farms have their vehicles and animals ready to leave the area the minute the Paranapanema overflows and floods their land, as has occurred in previous years.

Mario Antonio Margutti, president of the Ourinhos Civil Defense Municipal Council, has assured that the central area of the city is in no danger of flooding, but Vila Brasil, on the banks of the Pardo River, could be affected, particularly the water treatment plant that serves the municipality.

6362
C90: 5400

MINISTER OF HEALTH ANNOUNCES MALARIA-CONTROL CAMPAIGN

Official Announcement

Accra DAILY GRAPHIC in English 5 Feb 81 p 1.

[Article by Charles Turkornoo]

[Text] The Ministry of Health has mounted a nationwide programme to control the carrier and spray the breeding grounds of mosquitoes which cause malaria.

As a first step, a team has been sent to the Keta Lagoon Basin to identify areas which need aerial spraying while a similar team was also working in Accra.

This was disclosed by Dr Kwamena Ocran, Minister of Health, when he appeared before Parliament to answer questions from Members.

He explained that aerial spraying needed a lot of planning so as not to throw any poisonous insecticides into the atmosphere which would later affect the people.

Dr Ocran urged Ghanaian families to start in their small ways, the control of the breeding grounds of mosquitoes around their houses and not to wait for health inspectors to query them before.

Planning Urged

Accra DAILY GRAPHIC in English 5 Feb 81 p 2

[Editorial: "War Against Mosquitoes"]

[Excerpt]

MOSQUITOES in the country, particularly those in the nation's capital, appear to be immune to the destructive effects of insecticides.

If they are not, then the only conclusions we may reach are that the insecticides being sold on the markets are of poor quality.

We say this because the mosquitoes appear to be defeating us in the battle to save ourselves from malaria.

During the First and Second Republics, helicopters were used in spraying the cities, towns and villages to get them rid of mosquitoes. Today, Ghana is not in a position to do this. We do not have the aircraft, the aviation fuel and the other inputs for such an important national assignment.

It is, therefore, not surprising that our Health Minister, Dr Kwame-

na Ocran, could not tell Parliament yesterday that he had an effective means of combating mosquitoes in the country.

Our only worry is that the Health Ministry should have planned ahead with the scanty resources at its disposal to avoid a situation the nation now finds itself in. With the assurance, however, from the Health Minister that he has set in motion a national programme to fight the mosquitoes, let us hope that within the shortest possible time, we shall be free from mosquito bites.

CSO: 5400

HONG KONG

BRIEFS

NEW RABIES CASE CONFIRMED--The discovery of the 16th rabid dog since October has been termed "another isolated case" by the Agriculture and Fisheries Department. The uninoculated dog bit a nine-year-old girl, Tang Fungyim, near her home in Ha Tsuen in Lau Fau Shan on January 28. She has been given a full course of vaccinations by a Yuen Long hospital. [Excerpts] [Hong Kong SOUTH CHINA MORNING POST in English 13 Feb 81 p 11]

CSO: 5400

BRIEFS

MALARIA OUTBREAK IN MILAN--A 36-year-old woman in serious condition is confined to the recovery ward of San Carlo Hospital. She is suffering from a form of cerebral malaria contracted during a recent trip to Ivory Coast. "This is not the first case," they are saying at San Carlo. "Back in September, we admitted a young man and his sister who had scarcely arrived in Africa when they were struck by the disease; they had immediately returned to Italy. The girl had got off with a light case. However, her brother developed serious complications. Fortunately, everything turned out for the best." "Again 15 days ago," an expert from the analysis laboratory adds, "we had a rather serious case of malaria which was successfully treated." This is an indication that malaria is, unfortunately, not yet completely stamped out, relegated to the past. Although the disease has been eliminated in Italy through land reclamation, anyone who leaves our country to work or tour African or South American countries is still in danger of being stung by an Anopheles mosquito. [Excerpts] [Milan IL GIORNO in Italian 26 Jan 81 p 11] 8568

CSO: 5400

NUMBER OF MEDICAL PERSONNEL IN MALARIA ERADICATION WORK NOTED

Vientiane VIENTIANE MAI in Lao 15 Dec 80 p 1

[Article: "Throughout the Country There Are More Than 9,000 High, Middle and Basic-Level Doctors and Medical Assistants"]

[Text] During the past 5 years, from 1976 to 1980, in order to carry out public health work in accord with the lines of the party and state which sees prevention of disease as primary and cure as important, the Ministry of Public Health has given special attention to expanding the public health network at the production bases by training cadres and providing guidance concerning public health. The aim is to help the people have good health so that they can participate in the revolution and achieve good results.

Thus, in the entire country, during the past 5 years, the Ministry of Public Health has trained 128 malaria eradication and taken blood samples from 333,369 people in 2,669 villages in 300 cantons in 40 districts. Malaria was found in 51,119 people. This is an average rate of 15.3 percent. A total of 113 tons of DDT has been sprayed. A total of 892,614 people have been protected from malaria. Drugs [to prevent] malaria have been given to 691,722 people. Besides this, a propaganda movement has been launched and the "three clean" sanitation principles have been taught. A total of 1,665,825 people have been instructed. A total of 2,640,231 children have been inoculated against various diseases. Some 32,542 wells and water fountains have been built. In eight cantons, the people have been mobilized to build 84,843 toilets and 12,117 "sanitation warriors" have been trained. A total of 2,100,600 people have been given physical examinations and drugs as inpatients in the hospitals each year and 225,096 patients have been treated at the hospitals each year.

As compared with the period before liberation, during these past 5 years, this work has improved greatly. For example, between 1893 and 1945, there were only 11 high, middle and basic-level doctors and medical assistants. In 1960, there were 466 such people. In 1973 there were 965 people. In 1976 there were 5,022 people. And now in 1980 there are 9,002 high, middle and basic-level doctors and medical assistants.

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CSO: 5400

BRIEFS

MEASLES VACCINATIONS--Nkhosakota, Over 7,000 children between the ages of six to 24 months have been vaccinated against measles during a 12 day campaign which ended here last Friday, January 30. The exercise, covered the areas of Chiefs Kanye, Malengachanzi, Mwachama and sub-chiefs Kafusila, Mphonde and Mwanambo. There were 40 vaccinators in all and a total of six Land-Rovers and two motor-cycles were used to carry vaccines and personnel to the numerous vaccination points in the district.--MANA [Text] [Blantyre DAILY TIMES in English 6 Feb 81 p 3]

Salima, Tuesday. The measles vaccination team involved in a country-wide measles inoculation campaign is now in Salima District. An official of the Ministry of Health leading the team told MANA in an interview at the district hospital here that the main aim of the campaign was to improve public health standards of the people. The team will start vaccinating children in each and every village in the district this Wednesday, February 11. Approximately 7,000 children under the age of two years in Salima will be vaccinated. The official explained that his group will start its work from Salima North and end with Salima South. Before coming to Salima the team had vaccinated almost 7,000 children against measles in Nkhosakota District. The official stated that the vaccination project against measles started in Thyolo in the Southern Region and Chitipa in the North in 1977 and later moved to the Central Region. The programme ends in Salima. [Text] [Blantyre DAILY TIMES in English 11 Feb 81 p 3]

CSO: 5400

MOZAMBIQUE

BRIEFS

CHOLERA DEATHS--Reports from Beira say that 22 hospitalized persons had died of cholera by Tuesday, 24 February, since the outbreak of the disease last year. There have also been 17 residential deaths. The total number of people hospitalized was over 300. Cholera cases have also been recorded in Dondo and Nhamatanda districts, where measures have been taken to fight and contain the disease. [Maputo Domestic Service in Portuguese 1030 GMT 26 Feb 81]

CBO: 3400

CONTROVERSY OVER RUBELLA IMMUNIZATION PROGRAM CONTINUES

Hospital Head's View

Wellington THE EVENING POST in English 16 Jan 81 p 11

[Text]

CHRISTCHURCH, Jan 15 (PA) — The eradication of rubella (German measles) would not be possible in New Zealand because most males are not immunised against the disease, according to the medical superintendent of Christchurch Hospital, Dr D A Andrews.

Although males were not badly affected if they con-

tracted the disease they could be carriers of the condition if they are not immunised, and then could pass on rubella to non-immunised women of child-bearing age.

This was the group most at risk as rubella in a pregnant woman could cause major birth deformities, he said.

Health Director's Response

Christchurch THE PRESS in English 16 Jan 81 p 4

[Text]

PA Hamilton
Eradication of rubella (German measles) is not a Health Department aim, says Mr Campbell Begg, director of the Health Promotion Division.

The department's aim was total direct protection through the mother of the only person at risk — the unborn child, he said.

Dr Begg referred to a statement by the medical superintendent of Christchurch Hospital, Dr D A Andrews, that New Zealand's present vaccination programme made eradication of rubella impossible. Males were not immunised and could become carriers passing the disease on to non-immunised women of child-bearing age, Dr Andrews said.

According to Dr Begg, a level of rubella in the community produces from 85 to

95 per cent of natural protection against the disease in women of child-bearing age. Eradication of the disease would eliminate this natural method of protection, and a reintroduction from abroad might then be disastrous.

The presence of the disease in the community also tended to boost the immunity from vaccination with mild reinfections too slight to cause problems for an unborn baby.

Dr Begg said that the department's two-pronged attack against rubella was through immunisation of girls at Form 1 level, and a campaign to blood-test young women of child-bearing age before pregnancy.

Rubella contracted by a pregnant woman could cause birth defects in her child, Dr Begg said.

Rebuttal to U.S. Criticism

Wellington THE EVENING POST in English 7 Feb 81 p 17

/Text/7

CRITICISM made by an American professor of pediatrics concerning New Zealand's policy of immunising only girls against rubella has sparked a strong reply from the Health Department.

The director of health promotion, Dr Campbell Begg, said yesterday that Professor R Guthrie, of the State University of New York, was wrong in his assumption that only girls were immunised because it saved money.

"He is quite correct in saying that viruses do not differentiate between boys and girls, but he is incorrect when he suggests that boys are not immunised as a cost-saving venture," Dr Begg said.

"Professor Guthrie is also wrong in saying our policy would not hold water overseas. The same policy that is applied here is also in force in the United Kingdom, Australia, and some Canadian provinces."

Dr Begg said the recommendation to immunise only girls was made on valid epidemiological and practical grounds, and the cost factor was not even considered.

"In the United States, where both sexes are immunised, it has become apparent that there has been little, if any, decrease in rubella occurring in adults. Pregnant women in that country are still at risk," Dr Begg said.

CS0: 5400

POLIO VACCINATION FOR ALL PRESCHOOL CHILDREN SOUGHT

Auckland THE NEW ZEALAND HERALD in English 2 Feb 81 p 5

[Text]

The Health Department wants to vaccinate all children against poliomyelitis before they start school.

A recent national survey showed that about 80 per cent of school children had been vaccinated by the time they started school.

And the remaining 20 per cent could be immunised without any threat to vaccine stock in New Zealand.

The director of health promotion for the department, Dr Richard Campbell Begg, said there would be no danger of running out of the polio vaccine even if the 20 per cent were immunised immediately.

He said there may possibly be shortages in smaller country towns, but stock could be replenished when requested.

Dr Campbell Begg said the department had never faced

a serious shortage of the vaccine before and did not think there would be one in the near future.

"The department calls for vaccine tenders every three years and once stock is bought, it is stored at Wellington," he said.

"Wellington dispenses the vaccine to hospitals throughout the country and general practitioners get the treatment from the hospital."

The polio vaccine is offered when a child is three months old, five months, 18 months and five years.

The department only recently introduced the fourth dose at school entry, after finding that the antibodies covering one strain could weaken.

In common with most countries in the world, the polio vaccine in New Zealand is taken orally.

HEALTH CERTIFICATION OF ALIENS URGED

Kaduna NEW NIGERIAN in English 7 Feb 81 p 4

[Letter to editor by Tauhid M. Bello: (ECOWAS, Aliens and Diseases")]

[Text] Sometime last year, I wrote an article titled, "Plant Quarantine the Need for Pragmatic Overhaul." In this article I made mention of the tendencies in imported planting materials and livestock coming into the country accompanied by some pests or diseases.

I would like to further elaborate that this is not limited to plants and live-stocks alone. Migrant aliens and other class of people who have been living in some places for a reasonable length of time before leaving for another place can not be taken for granted to be free from pests or diseases of environmental typicality.

To compliment my statement, one can understand why if he intends travelling on a international basis he is expected to have a medical certificate to certify him free from any major disease prevalent in his home place. Without such a certificate, one would not be issued with a valid visa to enter his country of destination.

Let us then stop and ask ourselves. What proof have we in Nigeria that the aliens that are daily flocking into the country are free from pests and diseases prevalent in their home ecological system.

Without any valid proof to ascertain the aliens' health status, it is dangerous to continue to allow them to mix freely with the indigenous inhabitants of this country. Human beings, being what we are, there are many avenues of intercourse between the aliens and the indigenes that could lead to the spread of potentially dangerous communicable diseases. These include, living together, using the same facilities, etc.

At the present moment, it appears there is a kind of sickness prevalent which medical experts have not yet been able to identify its causes or source of introduction.

In the light of the above it would appear, that despite whatever permissiveness that abound in the ECOWAS Charter, there is every need for every incoming alien or other class of immigrant to present a valid medical certificate to show that he does not carry any transmittable disease before being allowed to enter into Nigeria.

In case of doubt as to the validity of the medical certificate, the alien should be further subjected to another rigorous medical test to confirm his or her true health status.

It would appear there is a very strong need for this country to impose a very strong legislation to prevent Nigeria being made the dumping ground for refugees who could be potential vectors of dangerous communicable diseases.

CSO: 3400

SRI LANKA

BRIEFS

HUMAN CHOLERA IN GALEWALA--An outbreak of cholera has been reported from Galewala, in the Matale District. According to medical reports reaching Police Headquarters, five positive patients of cholera have been transferred from the Galewala Hospital to the Matale General Hospital. While several more patients, said to be afflicted by this disease, are being treated at the Galewala Hospital, the Medical Officer of Health in the area, is reported to have visited Galewala yesterday to ascertain the situation. [Text] [Colombo SUN in English 20 Feb 81 p 1]

CSO: 9400

TAIWAN

BRIEFS

SNAILS, SHRIMP'S MAY CARRY MENINGITIS--Kaohsiung--A fourteen-year-old aborigine boy died of meningitis last December, he caught the disease from his favorite dish snails. The boy suffered from fever, headaches and finally fell into a coma last May. When he was sent to the hospital in Kaohsiung in June, only his brain pressure and fever could be brought under control after a month's treatment. He had never come out of the coma. Physicians of the hospital have warned people to pay more attention to the source of snails and fresh water shrimps that they eat. (Text) [Taipei CHINA POST in English 17 Feb 81 p 7]

CSO: 3400

BRIEFS

CHOLERA VACCINE FROM EGYPT--The Minister of Health, Dr Ezra Nkwasiwe, has received a donation of 30,000 doses of cholera vaccine from Egyptian Ambassador to Uganda Mr Kamel. During the ceremony, Nkwasiwe appealed to Egypt to assist Uganda in the training of technical personnel in the form of scholarship award and with experts in some fields. The Egyptian Ambassador said with a stable government just formed in Uganda, Egypt will continue her assistance to Uganda. He informed the minister that two Uganda professors from Makerere Medical School will soon go to Egypt for a study tour at the invitation of the Egyptian government. [Excerpt] [Kampala UGANDA TIMES in English 21 Jan 81 p 3]

CSO: 5400

'MYSTERIOUS DISEASE' HITS CAMP

Lusaka TIMES OF ZAMBIA in English 12 Feb 81 p 1

[Excerpt] **THREE Form Five school leavers at Lwamfumu National Service camp in Mansa have died from a mysterious disease which has hit the camp.**

This came to light in Parliament yesterday following a point of order raised by Bahati MP, Mr Simon Kalaba who asked Speaker of the National Assembly Mr Robinson Nabulyato if the Government was in order to keep quiet about the deaths.

He said about 40 students were attacked by the disease and that parents were anxious to know what was going on at the camp.

"If it has become difficult to run the camp, let the Ministry of Defence close it in the national interest," he said.

He told the House that one of the students died at Kitwe Central Hospital while the other died at the University Teaching Hospital in Lusaka.

Making the ruling, Mr Nabulyato said the point of order was a serious one "and that is why I am paying attention to it."

He said although the MP mentioned two deaths, he as

a citizen of the Republic knew that three recruits had died and that the third died yesterday morning.

"Since the Secretary of State for Defence and Security, Grey Zulu, is not in the House and the Minister of State for Defence is also out, and the Prime Minister looks like he wants to give an immediate reply on their behalf, I ask the Government to come up with a proper

statement on the position at the camp," the Speaker said.

In Chingola last night, the recruit who died at Kitwe Central Hospital was identified as 18-year-old Josephine Mapoma.

Her brother, Ernest, said Josephine died on Monday after being transferred from Mansa General Hospital where she was admitted at the weekend suffering from suspected malaria.

But Kitwe Central Hospital senior medical superintendent, Mr Harry Sunkwa-Mills said the girl was brought to his hospital dead from Mansa.

Six of Josephine's colleagues at the camp arrived yesterday from Mansa for her burial today saying more recruits were in Mansa hospital, but described the situation at the camp as normal.

One of the girls, Mukuka Mwetwa, said Josephine was constantly sick and was put on a drip last weekend before she was transferred to Kitwe.

UTH senior medical superintendent, Dr Davies Mwaha, confirmed that some Form Five school leavers from Mansa had been admitted at Lusaka's University Teaching Hospital but declining to give details.

Dr Mwaha said he had been furnishing the Ministry of Defence with information on all the latest treatment given, and about every development on the case.

When a *Times* reporter visited the hospital, he found Dr Mwaha instructing his secretaries to be inoculated against the mysterious disease, saying the situation was serious.

Later, Minister of Defence Mr Wilson Chakulya arrived at the hospital accompanied by senior defence officers. Dr Mwaha then asked a nurse to inoculate the minister and his team, leaving out the Press.

Asked to give details on the matter, Mr Chakulya said he would do this today in Parliament.

He said two plane trips were made to Mansa after receiving reports that there was an outbreak of a mysterious disease which Mansa General Hospital could not contend with.

Some specimens had been taken and would be flown to London, he said.

A group of medical experts was in Lusaka awaiting inoculation before they could be flown to Mansa.

"Dr Mwaba is at the moment busy getting in touch with the Medical Stores to see what medicine he can find so that the group moves into the area well prepared," Mr Chakulya said.

He insisted that the outbreak of the disease should not be published before today as he was still gathering information.

Bed-ridden

According to unconfirmed reports, 145 girls were bed-ridden and 15 of these were flown to the UTH on Sunday, while 39 were flown on Tuesday.

Those flown to Lusaka are reported to be in critical condition.

Since the disease had been reported to be infectious by Dr Mwaba, it was feared those still at the camp would contract it.

Parents rushed to the UTH yesterday to find out if any of their children had been hospitalised.

They were not allowed to see the quarantined girls.

CSO: 5400

IMPORTANCE OF VETERINARIANS, LIVESTOCK POINTED OUT

Kabul KABUL NEW TIMES in English 8 Feb 81 p 3

[Text] Livestocks in Afghanistan suffers enormously from all type of animal disease both infectious and parasitic, and if these disease are not scientifically controlled will be a great economic loss for the country. Hence keeping the animal healthy, protecting them against various animal disease, and protecting them against zoonotic and epizootic diseases are the most important and major needs which requires top priority for upgrading potentially rich sector of the national economy, training of competent profession, veterinary graduates and the related staffs and the personnels. Therefore, according to the aspiration and aims of the country planning is believed to be one of the most and urgently needed requirement to obtain its goals and objects.

There is no doubt that we consider this demand of the issues related to the veterinary profession, and do we have to estimate the need of veterinarian per thousand animals head accordingly, therefore in order to fulfill the country's demands we would require

to cater to the needs of thirty millions of animals head which presents in the country at the present moment, that is having the said numbers in mind, we would be in need of providing and training of three thousand veterinarians in the next few years or a decade to come. This figure is relevant that one each veterinarian is needed if it follows for a thousand of animal head.

Concerning what we said above as far as the statistic is concerned the number graduating veterinarians handle and run the subjects and problems of veterinary science being the backbone of a major sector of national economy. From the present existing technique and training colleges, institutes and faculties is something roughly about zero.

Due to the above reason in order to provide the professional and competent veterinarian the country may likely required a period of 37 years to reach the target number of trained professionals that future thrust.

By referring this statistics we are convinced the economic planning of the country would suffer from

this internal weakness of the livestock industry in which this big loss is merely due to the high losses in the animal health and protection.

The role of veterinary profession is the detection, prevention, and eradication of disease in livestock and public health, aspects of veterinary medicine have been quite known and also the problem connection with veterinary education, vaccine production and vaccine field of fundamental research pertaining to animal and human health.

But there is a recent focus of often some on the urgent needed augment the production of animal origin in different areas of developing countries which redress the need of an aggressive viable veterinary profession more urgent in a country like Afghanistan which traditionally, economically upon the livestock production industry, for its major source of earning foreign exchange.

The medical profession tackles the problems of prevention and creation of medicine improved, sanitation and hygien and eradication of disease carrying

victors. It is this veterinary profession to provide the necessary path way which leads to the health of millions of Afghan nation.

It is to be kept in mind that a very large amount of survey work remains to be done to provide accurate regional data on disease incidence not only these diseases regarded as essential contagious, but of the entire mess of infectious and non-infectious condition to which tropic and untropical livestock are subjected. Therefore in order to support the national economy, so as to promote the standard and level of people's life, attention is needed to be drawn to keep the livestock health and animals void of any sorts of diseases by preventing, control and the treatment.

Knowledge of the epidemiology, incidence and general significance of many other conditions are much less complete in almost all area and the fragmentary situation can be expected to train for a long time suitable veterinary services and infrastructural are upgraded to the necessary students. Such conditions can only be of initiated infrastructure, there is an utmost need to train veterinarians adequately in the productive sciences of nutrition, breeding, management and not the base economics and social sciences as well.

It is worth to be mentioned that the great undeniable economic importance of animals as well as the profession of veterinary

medicine in human life have warranted that animals health and animals' breeding should be taken in mind right from the very beginning of farming business receive proper attention ensure more and better quality of animal production so as to promote and raise up the level of the economic nation of the country, therefore it is to be emphasised that the veterinary profession considering the matter of animals and as well as the national income should be started parallel with animal domestication and flourish up with the history and advancement of civilization which made the animals' role much more evident in human life and supporting the socio-economic sector of the country as well.

Considering the idea pointed out, today there exist veterinary and farming vocational, schools, colleges, institutes, long-term courses all over the well developed and many developing countries, where the history of the above said and the precedence which been busy by training technical personnels of various calibers goes up to some hundreds of years.

In order to promote the socio-economic issues of country and the welfare of the people of the society, it is the responsibility of the well authorised departments to pay a keen attention to work on the issue of veterinary profession, different institutions of animal health and production.

Being crystal clear we should add up that considering the veterinary profession, the animal production as the vertebral column of national income constitute the most important and main items of the country's exports notwithstanding the fact that the majority population of the country is engaged in farming, but even though a shortage of protein is obvious, due to the non-existence of facilities and techniques special to the livestock, breeding, prevention, diagnosis, treatment and animal production by the veterinary profession and other concerned related institutes in Afghanistan. Leading to that given

fact that the desired amount of foreign exchange is not gained through animal production, therefore aside to the other concerned institutes it is the responsibility of the faculty of veterinary science of Kabul University and the university being the academic nucleus itself to take over all the problems of livestock, and pay a honestly and keen attention to the issues, such as eradication of animal disease, method of prevention, well diagnosis of animal diseases and honestly treatment and be adopt with their profession whole-heartedly, because its development deemed undeniably essential in the view of all over progressive compatriots.

To emphasise once again let us dedicate ourselves and our efforts to the call of our livestock industry

and its ancient calling which backs up the national economy as a major sector and backbone of socio-economic factor of Afghan society from now onward so as the country and the vast masses of the country would not be in a position to suffer from the socio-economic point of view tomorrow. Our tomorrow is now, let the aspiration of the country and its vast masses trump over traditions and inertia

CSO: 5400

COSTA RICA

BRIEFS

HOG CHOLERA SITUATION--The head of the Rare Diseases Department of the Agriculture and Livestock Ministry has reported that studies show there is no hog cholera in Costa Rica. The official said samples sent to the United States for analysis proved negative but quarantine measures will continue in Guanacaste for some time as a precaution. [PA260000 San Jose Radio Reloj in Spanish 1200 GMT 24 Feb 81 PA]

CSO: 5400

BOOKLET AIDS FARMERS TO PREVENT SWINE FEVER

Blantyre DAILY TIMES in English 9 Feb 81 p 5

[Text] MZUZU
Sunday

PIG owners are advised by the Ministry of Agriculture and Natural Resources to erect double wire or pole fences to prevent their animals from getting African swine fever through contact with wild pigs.

In a booklet called *"Measures to Control African Swine Fever,"* the Ministry advised farmers to keep their pigs away from wild pigs and follow measures laid down by the Veterinary Department.

African swine fever which is present in wild pigs without harming them has a mortality rate of 95 to 100 per cent in domesticated pigs of all ages.

Domesticated pigs can get the disease through contact with wild pigs, food or bedding contaminated with the excretion of wild pigs and sometimes with meat of a slaughtered infected pig, the booklet said.

It added that domesticated pigs should not feed on food such as mudeya which might have been contaminated with excretion of wild pigs.

The Ministry has declared the Central and Southern Regions African swine fever areas. Pig owners in these areas are strictly advised to keep their animals in closed fences in order to control the disease.

The control of the disease, the guide explained, will not only save the pigs from dying but will also help the pork products industry to maintain production of bacon, pork sausages and a thriving export trade.

For a period of six months farmers will be advised on any new rules and

suitable fencing if required.

After six months the Government will be empowered to take action on any pig found roaming outside fences anywhere in the African swine fever area, it said.

Control will be declared for an eight-kilometre radius around an established commercial unit and all farmers will be required to feed only commercially produced rations or rations produced on the farm using ingredients from approved sources free from suspicion of contamination with African swine fever if there is an outbreak of the disease, the guide said. —MANA

BRIEFS

DOG, CATTLE, CHICKEN VACCINATIONS--Mzimba. A rabies tie up order will be in force at Mzimba boma and Chikangawa and the surrounding areas from 9 to February 15 this year. A spokesman of the Regional veterinary office in Mzuzu said in a circular letter that due to numerous confirmed cases of rabies occurring at the two places, a tie up order has been found necessary. The spokesman said that in the course of these tie ups, all dogs not vaccinated in June last year should be brought to Mzimba veterinary office and Chikangawa football ground for vaccination on the dates laid down. "Dog owners are warned to keep their dogs under chain day and night until the respective tie-ups are lifted," he said. "All stray dogs will be shot dead." The spokesman added that at Chikangawa, cattle and chicken vaccination will also be carried out against brucellosis and new-cattle diseases respectively. [Excerpts] [Blantyre DAILY TIMES in English 9 Feb 81 p 3]

CSO: 5400

FIRST HYDATIDS CASE IN 18 MONTHS DETECTED IN DOG

Isolated Incident

Christchurch THE PRESS in English 10 Jan 81 p 7

[Text]

PA Hamilton

Hydatids has been found in a Waitomo dog, the first case detected in New Zealand in 18 months.

But Hydatids Council officials said it appeared the case was isolated, because access to the farm where the infected dog was kept was over a river and this should stop the disease from spreading.

Hydatids can cause death to humans and animals. The cycle begins when a dog eats raw offal or untreated meat which can carry a hydatids cyst. These cysts develop into tapeworms, segments of which are passed by the dog. The segments contain hydatid eggs, which, if swallowed by man or farm

animals, will develop into a hydatids cyst. The only way to remove the cysts, which usually grow in the liver or lungs, is by surgery.

The senior field advisory officer for hydatids throughout New Zealand, Mr D. Kasper, described the isolated position of the farm the infected Waitomo dog is on as "pure luck."

Mr Kasper said he was very disappointed to learn of the dog with hydatids at Waitomo.

"One breakdown like this may set us back two or three years in eradicating hydatids," he said.

The campaign against hydatids has been officially going for 21 years, but before that many people

worked voluntarily to prevent the disease.

Mr Kasper said there was no penalty for a farmer who owned an infected dog, but the farmer had to pay for the treatment of the dog, and his stock would be suspected if he tried to sell them.

According to Mr Kasper, about 27 per cent of adult stock in New Zealand have hydatids, but the number is falling.

"It is possible to eradicate hydatids, but much more rigid attention needs to be paid to dog food," he said.

The hydatid control officer in the Waikato County, Mr H. Edwards said that much more care needed to be taken feeding dogs.

Suspected Human Case

Christchurch THE PRESS in English 13 Jan 81 p 6

[Text]

A suspected case of hydatids in a middle-aged Christchurch man has been reported to the Health Department.

The Deputy Medical Officer of Health in Christchurch (Dr M. A. Brieseman) said that reports of the condition were "relatively rare."

"However, in spite of precautions such as dosing dogs and preparing dog food properly we get a case from time to time."

In the three cases in humans reported in the last few years the condition had been dormant for a considerable period, Dr Brieseman said.

MEAT PROCESSING PLANTS BELOW EEC HYGIENE STANDARDS

Inspection Team Due

Wellington THE EVENING POST in English 15 Jan 81 p 6

[Text]

AUCKLAND, Jan 14 (PA). — None of New Zealand's 44 export meat works complies wholly with European Economic Community hygiene standards, according to a Ministry of Agriculture official.

An EEC inspection team is due to visit New Zealand in March.

The EEC veterinary inspection team, split into three of four groups, will spend a month inspecting every works, packing house and cool store in New Zealand to ensure they comply with the EEC's "Third Country Veterinary Directive."

This directive sets the standards for countries wishing to export meat to the Community.

In 1971 the meat industry here was given 10 years to meet with the EEC requirements, and \$28,000,000 has been spent since then upgrading facilities.

More than two-thirds of the export works have completed at least 75 percent of a Ministry of Agriculture and Fisheries programme, but the Ministry's meat division director, John McNab, said not one plant totally complied with EEC requirements.

Mr McNab would not be drawn on what might happen over the issue later this year.

But it appears the Community could begin insisting that works exporting to the valuable EEC sheepmeats

market first notify adequate compliance with the directive.

"If you want to export to the EEC you have to meet the requirements, that is the real guts of the matter. The customer is right," Mr McNab said.

When the meat companies have finished their present spending they could still be faced with another bill for meeting requirements.

That is because New Zealand has submitted a list of equivalents on certain points in the directive and it hopes the Community will accept that some techniques used in New Zealand are as good or better than those required by the EEC.

The argument is that it should therefore be unnecessary to meet precise community stipulations in some areas.

But Mr McNab said he did not know what might happen as a result of the inspection. That would be a decision made in Brussels.

Standards Defended

Wellington THE EVENING POST in English 26 Jan 81 p 4

[Excerpt]

CONFIDENCE in the high standard of New Zealand's meat processing plants was expressed today by the executive director of the Freezing Companies' Association, Mr Peter Blomfield.

He was sure a European Economic Community veterinary team would be very pleased with what it found when it arrived in this country for an inspection tour in March.

Press Association reports across the Tasman indicate that the inspection team was somewhat unhappy with hygiene standards at Australian freezing works and slaughterhouses.

It has been reported that no Australian works complied with EEC health standards.

Mr Blomfield said the meat industry in New Zea-

land had been following a plan to upgrade works to comply with the hygiene standards of many countries over the last 10 years.

"Our plants are among the best in the world."

Australia had placed emphasis in its upgrading programme on the fact that its major markets were Japan and North America, rather than Europe.

NEW ZEALAND

BRIEFS

BAN ON EXPORTS OF ANIMALS LIFTED--Australia has lifted its ban on imports of animals and animal products from New Zealand. The ban was imposed 12 days ago following a disease outbreak among pigs in New Zealand's South Island. Removal of the ban follows scientific tests which have ruled out the possibility of foot and mouth or other serious diseases. Australian officials have also notified Japanese authorities of the lifting of voluntary restraints on exports imposed by New Zealand. Papua New Guinea has also lifted its ban on New Zealand shipments, and Fiji and Tahiti are expected to do the same soon. [Text] [OM74]10 Melbourne Overseas Service in English 1230 GMT 24 Feb 81]

CNO: 5400

CAMEROON CATTLE DISEASES SAID UNDER CONTROL

Kaduna: NEW NIGERIAN in English 6 Feb 81 p 13

[Text]

SPORADIC outbreaks of contagious cattle diseases and the menace of tsetse fly which have plagued Gombe State in the past are now under effective control.

The deadly diseases under control include Bovine pleuropneumonia, Brucellosis, internal worms and external parasites. Cases of tsetse fly infestation have also declined considerably in the state.

The Commissioner for Animal Health and Forest Resources, Alhaji Abdullahi Kirin, told the New Nigerian that only 1,400,000 cattle were vaccinated last year as against 1.2 million cattle vaccinated in 1979.

Alhaji Abdullahi explained that most of the cattle vaccinated were in Numan, Karim Lamido and Song local government areas, all along the River Benue valley because of the green grass for pasture.

He said there were only a few outbreaks of livestock diseases in the state last year, particularly in Borgu, Gboko and Mubi local government areas.

Alhaji Abdullahi repeated his earlier suggestion for introducing compulsory slaughter and compensation policy of diseased livestock as one of the most effective and radical methods of eradicating contagious diseases in the country.

He announced that annual massive vaccination exercise before the outbreak of diseases had been another effective method of forestalling the menace of deadly livestock diseases.

The commissioner said veterinary clinics had been built in virtually all the existing local government areas to prevent and combat the outbreaks of animal diseases as well as the menace of other infectious parasites in the state.

He said more than 90 per cent cases of all outbreaks of dangerous diseases had been traced to influx of livestock from neighbouring states and the Cameroon Republic that migrated for pasture and water at the River Benue valley during the dry season.

On the menace of tsetse fly in the state, Alhaji Abdullahi said "this is not unconnected with and is in fact aggravated by our common border with the Cameroon Republic."

NIGERIA

BRIEFS

MONEY FOR VACCINATIONS--Tafawa Balewa Local Government Council in Bauchi state has voted 90,000 Naira for the purchase of animal medicines and vaccines this fiscal year. This was disclosed by the chairman of the local government's caretaker committee, Alhaji Jibir Zwal, while addressing cattle Fulanis when a team of J.P.28 campaign team against Contagious Bovine Pleuro Pneumonia (C.B.P.P.) visited Tafawa Balewa recently. Alhaji Jibir also disclosed that his local government had constructed four veterinary clinics and mapped out three grazing reserves. He assured the cattle Fulanis of the state and the local governments determination to provide drinking water for their cattle at the grazing reserves. Earlier, the J.P.28 team leaders, Malam Balarabe Ibrahim and Dr Daniel Maddo, had advised the Fulanis to report any outbreak of C.B.P.P. to the nearest veterinary clinic in the area. At Darazo, cattle Fulanis in the local government area have cried for more water for both human and animal consumption. When a team of J.P.28 visited Darazo for the campaign against Contagious Bovine Pleuro Pneumonia (CBPP), the Fulanis said lack of water was their greatest problem and therefore called on the state and the local governments to sink boreholes in the area. The zonal livestock officer in charge of the local government area, Malam Audu Maisamari said that over 94 thousand cattles and five thousand fowls had already been vaccinated against various diseases. [Text] [Kaduna NEW NIGERIAN in English 9 Feb 81 p 9]

CSO: 5400

BRIEFS

RABIES EPIDEMIC--A spokesman of the Panamanian Public Health Ministry Animal Disease Prevention Department announced that Panamanian health authorities are concerned over outbreaks of rabies in some Central American countries. The spokesman said the two last known cases of rabies in Panama were in 1970. Panamanian health authorities will start vaccinating the population against the disease. Special vigilance and control measures will be established at the Costa Rican border at Paso Canoas to prevent the disease from spreading to Panama. [PA260158 San Jose Radio Reloj in Spanish 0100 GMT 21 Feb 81 PA]

CSO: 5400

INCIDENCE OF FOUR 'KILLER DISEASES'

Lusaka TIMES OF ZAMBIA in English 11 Feb 81 p 5

[Exerpt] **MORE than 2,000 heads of cattle have died in Monze district this year from corridor, heartwater, redwater and tick-borne diseases.**

This was confirmed by Monze district veterinary officer, Dr Mohan Vyas, who said he had just received specimen from the laboratory in Lusaka confirming that the cattle died from the four killer diseases.

He said the cattle died in January in chiefs Monze, Hamusonde and Choongo.

A campaign to eradicate the diseases would soon be launched.

The explanation by the Veterinary Department follows a protest on Monday by 21 village headmen from chiefs Monze, Hamusonda and Choongo who went to the boma to demand for emergency veterinary operations from officers in Lusaka.

The village headmen informed Monze governor Mr Shadreck Mwimbwa, that a veterinary officer must travel from Lusaka to identify the killer diseases in the area because the local officers had allegedly failed to do so.

Warned

They warned that unless something was done quickly, more cattle would die in the affected area.

According to 1979 figures, there are more than 170,000 heads of cattle in the area that

are threatened by the killer diseases.

Mr Mwimbwa assured the village headmen that he was going to follow up their complaints. Mr Mwimbwa has summoned the provincial veterinary officer Mr Isaac Mwenya and Dr Vyas to explain the deaths of cattle.

BRIEFS

DIP TANKS INOPERATIVE--The Minister of Local Government and Housing, Mr Eddison Zvobgo, told Mr Ezekiel Sanyangare (ZANU-PF, Manicaland) at question time that 234 dip tanks had been damaged or destroyed during the war. Of these, 47 had been repaired and brought back into operation and a further 32 had been partially repaired and brought back into use. In the Bubera district all 54 tanks had been either damaged or destroyed but it had not been possible to begin to repair any of these because of action by dissidents. The Minister assured Mr Arthur Tapson (RF, Makoni) that the situation in Bubera was now under control, but added that heavy rain was now hampering the work. [Text] [Salisbury THE HERALD in English 14 Feb 81 p 5]

ANTI-PARVOVIRUS SHOTS--Bulawayo--More than 150 dogs were assembled in the Magistrates' Court in Victoria Falls on Sunday in an unprecedented canine callup, and given jabs of anti-parvovirus vaccine. The flurry started on Friday after two pedigree long-haired dachshunds became violently ill. One dog died on Saturday but the other has been saved. [Text] [Salisbury THE HERALD in English 24 Feb 81 p 10]

CSO: 5400

EL SALVADOR

BRIEFS

COFFEE RUST--San Salvador, 18 Feb (ACAN-EFE)--The Salvadoran Coffee Research Institute [Instituto Salvadoreño de Investigaciones Del Cafe--ISIC] has reported that over 10,000 cases of coffee rust have been located in various parts of the nation. ISIC director Francisco Fischner said 1,218 plantations covering 35,465 manzanas are infected. [PA260000 Panama City ACAN in Spanish 2118 GMT 18 Feb 81 PA]

CSO: 5400

HONDURAS

BRIEFS

COFFEE RUST--Some 800 manzanas of coffee have been affected by rust. Rodrigo Castillo, natural resources secretary, reported last weekend that since coffee rust was found on Honduran soil, to date about 800 manzanas of coffee have been hit by the blight. He said damage caused by the rust so far is minimal. [Tegucigalpa Voz De Honduras in Spanish 1145 GMT 16 Feb 81 PA]

CSO: 5400

YELLOW STRIPE RUST CONTINUES TO SPREAD TO WHEAT CROPS

Appears in South Canterbury

Christchurch THE PRESS in English 10 Jan 81 p 11

[Text]

PA Timaru
Yellow stripe rust which made its first appearance in a Southland wheat crop early last month has spread to south Canterbury.

A D.S.I.R. research scientist, Mr P. Sanderson, has positively identified the disease in a crop of spring-sown wheat "just north of Timaru." This has been confirmed by Dr Ian Harvey, of the Ministry of Agriculture and Fisheries plant health diagnostic station at Lin-

coln.

A Ministry farm advisory officer, Mr David Montgomery, of Timaru, said yesterday that South Canterbury producers should not panic.

"Our wheat ripens earlier than in Southland and yellow stripe rust will not be a problem for this harvest season," he said.

"In any case it is too late to spray but growers should be aware of how to identify the disease and control it for the next season."

At Crop Research Division

Christchurch THE PRESS in English 17 Jan 81 p 3

[Text]

The spread of the new disease of wheat, stripe or yellow rust, first discovered near Gore in Southland late last year, is continuing. It was found on Thursday in the variety, Tintea, at the Crop Research Division of the Department of Scientific and Industrial Research at Lincoln.

It was also in Tintea that the disease was first identified in Southland. It is a variety that has not yet been released for growing commercially, but the senior cereal breeder at the Crop Research Division at Lincoln, Mr G. M. Wright, said that a decision might be made in April or May if a sister variety in Rongotea

Dr P. R. Sanderson, a plant pathologist with the division said that the infection in the Lincoln wheat was slight and as the wheat was in the milky dough stage its effect would be slight.

All commercially grown crops in Canterbury were now too far advanced to be affected by the disease, which had also been found in the Waimate and Timaru districts. The Tintea being grown at Lincoln was late sown because the seed was raised overseas under international arrangements and it was therefore at a susceptible stage.

Dr Sanderson believes that spores of the disease were

probably carried across the Tasman in a southerly front reaching Southland where the disease was first noticed in an autumn-sown crop. It was subsequently found to be widespread in autumn-sown crops in the Queenstown area. More southerly fronts might have carried it north to Otago and Canterbury.

Had the disease been blown across by north-westerly winds, Dr Sanderson says, it would have been seen first in Canterbury.

The other way by which the disease is spread is on people's clothing and Dr Sanderson thinks that it must have entered Australia that way.

In Southland, where the disease appeared earlier, unsprayed crops could have yield losses of up to about 30 per cent, but considerable spraying had been done and a good degree of control reported.

While there will be little or no effect from the disease in Canterbury this season, there could be a different story next season. But Dr Sanderson said that triadimefon or Bayleton was very effective in controlling the disease, the best results being obtained where it was applied at the first signs of infection.

Use of that material could also fit in with control of mildew and brown rust.

Spraying done to control yellow rust might also take care of brown rust, but more than one spraying might be needed against yellow rust.

There will be interest in how the disease survives in the period between about February and April-May when there are no wheat crops in the ground. The spores are short-lived and it has generally been thought that the disease persists only on wheat plants, although Dr Sanderson says that in Australia it has also been found on some grasses.

The incidence of the disease in Canterbury and Southland could differ because of the varieties of wheat grown in the two provinces. Takaha, the main variety grown in Southland

is very susceptible to the disease. Kopara and Karamu have good field resistance to it and Rongotea is somewhere between these two varieties and Takaha in its resistance.

However, Dr Sanderson thinks that conditions in New Zealand may suit the disease. Overseas where night temperatures are above 14deg. Celsius the spread of the disease is halted. But in New Zealand with lower temperatures and dew conditions favourable for infection, the disease is able to develop in the warmer day conditions.

Dew seemed to be an important factor, Dr Sanderson said. On a north-westerly night when there was no dew, even at lower temperatures infection would not take place.

Areas of Central Southland

Wellington THE EVENING POST in English 19 Jan 81 p 6

[Excerpt]

INVERCARGILL, Jan 17 (PA). — Yellow striped wheat rust has now been positively identified in five wheat crops in the Oreti, Dipton-Bannockburn and Otapiri districts of central Southland.

Since the original discovery of the disease in a crop at Otama in December, it has been found in new season's wheat crops as far north as South Canterbury.

CSO: 5400

BRIEFS

BLACK SIGATOKA SPREAD--The newspaper LA PRENSA has received information from Bocas Del Toro that black sigatoka fungus has been detected in the banana plantations in that province. Common sigatoka had been detected in the past and could be fumigated every 18 to 24 days, but black sigatoka has to be fumigated at least every 1 days [as printed]. Chiriqui Land Company's yearly production costs will thus increase by more than \$5 million. The government has not yet taken any quarantine measures and the problem has not been publicized. [PA260158 Panama City LA PRENSA in Spanish 19 Feb 81 p 1 PA]

CSO: 5400

SYRIAN OLIVE TREES SUFFERING FROM WILT

Damascus AL-BA'Til in Arabic 29 Jan 81 pp 4, 11

[Article: "Effective Measures to Eradicate the Disease Which Has Attacked the Olive Trees"]

[Text] The Agriculture and Agrarian Reform Ministry has adopted several positive proposals and taken effective steps to eradicate the disease which has hit olive trees in Idlib, Aleppo, Homs and Dar'a Provinces, the coastal area, and Tudmur, causing olive branches to wither and affecting the crops to the extent of the course of the disease in each area.

The ministry has devoted itself to studying the olive tree disease and searching for its causes, and for this reason has formed several investigation committees which have held a series of meetings, attended by specialists from the Crop Protection Directorate and chaired by the crop protection director, at which reports by the investigation committees have been studied.

Also participating in these meetings were protection officials from the provinces, heads of agricultural research centers, delegates from the national command and the General Farmers' Union, and the director of the Olive Bureau, in addition to the members of the ministry's investigation committees.

An official source at the Agriculture and Agrarian Reform Ministry announced that these studies clearly show that in Aleppo and Idlib Provinces, at least 3 percent of all the olive trees, or 480,000 trees, have been afflicted, and that the damages in these two provinces are estimated at 5 million Syrian pounds.

It has also been learned that many trees, in fact, entire orchards, have died in the southern provinces, and as for the trees in the Tudmur region, the situation is serious. The cause of this disease has been ascertained by the Aleppo and Damascus committees.

In his statement to SANA's correspondent, the official source added that it has therefore been agreed that several of the adopted proposals must be implemented and must certainly be given the necessary attention during follow-up.

The source explained that these proposals include listing the areas where the disease has spread, estimating the scope and severity of the disease and the

resulting damages, drawing up a plan for practical experiments to find the best way of combatting it, sending specialists to research centers to look into the results of international scientific research in this field, corresponding with data collection centers in France, Italy and the GDR to obtain all the research that has been published about olive wilt, and helping the Agricultural Scientific Research Directorate and the Olive Bureau complete their research into the matter.

The proposals also emphasize that the research and reports being submitted must be documented and disseminated to all the agencies concerned, and that the necessary resources such as appropriations and transportation must be provided for each and every committee so they can continue their work.

In view of the danger the present situation poses to the olive trees in the Tudmur Oasis, the ministry also suggested that prompt attention and research priority be given to this region.

The source mentioned that in view of the seriousness of this disease, and the fact that no chemical treatment has been discovered by those countries which have experimentally tested the effectiveness of fungicides against this disease, preventive measures must be taken to limit the ravages and spread of the olive wilt disease and reduce its damages.

The source said that these measures are as follows.

1. Tree stumps or wood knots taken from unknown sources should not be planted, because this is one of the main ways this disease spreads, and tree stumps must not be moved from one place to another.
2. Healthy clippings for grafting should be selected from healthy trees.
3. Pruned matter and uprooted trees should be burned.
4. Vegetables or cotton should not be planted inamongst the olive trees, so that there will be no source of infection on which the disease-causing fungus can live.
5. Dormant vegetation in the olive groves should be removed, because the withering affects many kinds of such vegetation.
6. Tilling should be limited to surface tilling as much as possible, avoiding deep tilling.
7. Overwatering should be avoided, and irrigation should be regulated according to need, since increased dampness encourages the disease.
8. Fermented organic fertilizer should be added, and nitrogenous fertilizer should be used sparingly.

The ministry also recommended that the following implementary measures be taken.

1. Healthy olive seedlings should be provided in sufficient numbers, so as to put a gradual end to the use of stumps.

2. Private and public sector seedling centers should be supervised, the distribution of diseased seedlings should be prevented and they should be destroyed, and the Olive Bureau should be assisted in applying these seedling control measures.

3. Information on this disease and how to protect olive trees from it should be disseminated by means of the various information media, to inform the farmers and technicians about it.

4. The Agricultural Guidance Directorate should be authorized to publish a bulletin on this disease.

5. A decree should be passed authorizing the local committees to draw up a plan for conducting experiments on combatting this disease, and a definite body should be appointed to follow-up the implementation of this plan once it is approved.

8559

CSD: 5400

ZIMBABWE

BRIEFS

LOCUST CONTROL PROGRAM--The Minister of Agriculture, Senator Denis Norman, said his Ministry was considering launching a renewed programme to educate and warn people about the danger of red locust plagues. During the committee stage of the locust Amendment Bill which raises the penalty for failing to report locust swarms from \$100 to \$200, Senator Ken Fleming protested against the value of legislation doubling a penalty for an offence which he said would be impossible to enforce. Senator Norman denied it would be impossible to secure convictions if people failed in their duty to report locust swarms and there was laughter when he said that the policy of offering bounties, as suggested by Senator Fleming, could cost the Government vast sums since locusts swarmed by their millions and it would be impossible to say who saw the swarms first. Senator Norman said the need for awareness of the locust threat was important today in view of the possibility of swarms gathering in neighbouring countries. The Bill was given an immediate unopposed third reading and now goes to the President to be signed into law. [Text] [Salisbury THE HERALD in English 27 Feb 81 p 7]

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